

## PROMOTING CULTURAL DIVERSITY AND CULTURAL COMPETENCY

## SELF-ASSESSMENT CHECKLIST

This checklist is intended to heighten the awareness and sensitivity of personnel to the importance of cultural diversity and cultural competence in human service settings. It provides concrete examples of the kinds of values and practices that foster such an environment.

1. I display pictures, posters and other materials that reflect the cultures and ethnic backgrounds of children and families served by my program or agency.

Directions: Select A, B, or C for each numbered item listed.

A = Things I do frequently

B = Things I do occasionally

C = Things I do rarely or never

## PHYSICAL ENVIRONMENT, MATERIALS & RESOURCES

2.	I insure that magazines, brochures, and other printed materials in reception areas are of interest to and reflect the different cultures of children and families served by my program or agency.	
3.	When using videos, films or other media resources for health education, treatment or other interventions, I insure that they reflect the cultures of children and families served by my program or agency.	
COMMUNICATION STYLES		
4.	For children who speak languages or dialects other than English, I attempt to learn and use key words in their language so that I am better able to communicate with them during assessment, treatment or other interventions.	
5.	I use visual aids, gestures, and physical prompts in my interactions with children who have limited English proficiency.	
6.	I use bilingual staff or trained/certified interpreters for assessment, treatment and other interventions with children who have limited English Proficiency.	
7.	I use bilingual staff or trained/certified interpreters during assessments, treatment sessions, meetings, and for or other events for families who would require this level of assistance.	

8.	When interacting with parents who have limited English proficiency I always keep in mind that:
	* limitations in English proficiency is in no way a reflection of their level of intellectual functioning.
	* their limited ability to speak the language of the dominant culture has no bearing on their ability to communicate effectively in their language of origin.
	* they may or may not be literate in their language of origin or English.
9.	When possible, I insure that all notices and communiqués to parents are written in their language of origin.
10.	I understand that it may be necessary to use alternatives to written communications for some families, as word of mouth may be a preferred method of receiving information.
VALUES & ATTITUDES	
11.	I screen books, movies, and other media resources for negative cultural, ethnic, or racial stereotypes before sharing them with children and their parents served by my program or agency.
12.	I understand and accept that family is defined differently by different cultures (e.g. extended family members, fictive kin, godparents).
13.	I recognize and accept that individuals from culturally diverse backgrounds may desire varying degrees of acculturation into the dominant culture.
14.	I accept and respect that male-female roles in families may vary significantly among different cultures (e.g. who makes major decisions for the family, play and social interactions expected of male and female children).
15.	I recognize and understand that beliefs and concepts of emotional well-being vary significantly from culture to culture.
16.	I understand that beliefs about mental illness and emotional disability are culturally-based. I accept that responses to these conditions and related treatment/interventions are heavily influenced by culture.
17.	I understand that traditional approaches to disciplining children are influenced by culture.
There is r	o answer key with correct responses. However, if you frequently responded "C"

There is no answer key with correct responses. However, if you frequently responded "C", you may not necessarily demonstrate values and engage in practices that promote a culturally diverse and culturally competent service delivery system for children with disabilities or special health care needs and their families.

Tawara D. Goode, Georgetown University Center for Child and Human Development-University Center for Excellence in Developmental Disabilities Education, Research & Service Adapted from - *Promoting Cultural Competence and Cultural Diversity in Early Intervention and Early Childhood Settings*-June 1989. Revised 1993, 1996, 1999, 2000 and 2002.